

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
MIKE THOMPSON FOR CONGRESS

Mailing Address 5429 MADISON AVENUE

City State Zip Code  
SACRAMENTO CA 95841

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
MIKE THOMPSON

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 01

Transaction ID: SB23.9322

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 / 24 / 2009

Amount of Each Disbursement this Period

1500.00

**B.** Full Name (Last, First, Middle Initial)  
PALLONE FOR CONGRESS

Mailing Address P.O. BOX 3176

City State Zip Code  
LONG BRANCH NJ 07740

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
FRANK PALLONE

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NJ District: 06

Transaction ID: SB23.9298

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 / 09 / 2009

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....

17000.00